TOWN OF AMHERST **BUILDING PERMIT**

TOWN OF AMHERST **INSPECTION SERVICES** 4 BOLTWOOD AVENUE AMHERST, MA 01002 Phone (413) 259-3030 Fax (413) 259-2402



PERMIT NO:

B20100215

APPLIED:

09/17/09

ISSUED:

09/18/09

FEES:

\$25.00

EST COST/VAL: CODE ED:

\$0

SITE ADDRESS:

9 CANTERBURY LN

ASSESSOR'S PARCEL NO:

27C000052

PROJECT DESCRIPTION:

OWNER

9 CANTERBURY LN

AMHERST, MA 01002

Erect 40 L x 20 W x 14 H tent - September 18 - 21, 2009

CONTRACTOR

NORTHAMPTON RENTAL CENTER

DONALD MILLER

59 SERVICE CENTER ROAD NORTHAMPTON, MA 01060

License # TENTS ONLY

HIC#

REMARKS:

TENTS PLEASE POST ON CENTER POLE OF TENT

SEYMOUR, THOMAS FIII & REIKO

Agent:

Approved By:

"Persons contracting with unregistered contractors do not have access to the guaranty fund (as set forth in MGL c. 142A)"

TOWN OF AMHERST INSPECTION SERVICES 4 BOLTWOOD AVENUE 01002 (413) 256-4030, Fax (413) 256-4076

APPLICATION TO CONSTRUCT, ERECT, REPAIR OR RENOVATE A SHED, SIGN, FENCE OR TENT

| SECTION 1 - SIT | TE INFORMATION | | | , , | | | |
|---------------------------------------|---|---------------------|--|---------------------|---------------|--|--|
| 1.1 Property Address: 9(anerbury Ln, | | | 1.2 Assessors Map & Parcel Number: | | | | |
| 900 <i>n</i> e | TWICH LITT | <u>.</u> | Map # | Parcel # | Plan lot # | | |
| u | . | | ee standing sign | | W | | |
| FRONT | YARD | SIDE | SIDE YARDS | | REAR YARD | | |
| Required | Provided | Required | Provided | Required | Provided | | |
| | | / | / | | | | |
| SECTION 2 - ZON | NING/PLANNING | | | | | | |
| 2.1 Zoning Dist | trict | | 2.2 Zoning permit Not Required [] | | | | |
| | | | Required [] | ZBA # | | | |
| 2.3 Design Revi | Lew Board Permi | t: Not Require | d [] Required | d [] DRB# | | | |
| SECTION 3 - DES | SCRIPTION OF PR | OPOSED WORK (cl | neck all applicab | le) | | | |
| 3.1 Shed | Front Yard [] Side/ Rear yard [] Peak height from grade Dimensions: ft (long) | | | | | | |
| 3.2 Fence | Front yard: Height Style | | | | | | |
| | Side & Rear Yards: HeightStyle | | | | | | |
| 3.3 Tents (30 days or less) | Dimensions: 10 (L) x 20 (w) x 14 (h) Fire rating hrs Dates: From 18500 09 To 21500 09 | | | | | | |
| 3.4 Signs | Wording on Sign | | | | | | |
| (1) Temporary Sign(s) | Attached to Building [] Free Standing [] Other(specify) Dates: From To | | | | | | |
| (2) Permanent | Free Standing [] Height from grade | | | | | | |
| Sign(s) | | | | | | | |
| | | ilding [] Di | | ft x | | | |
| CECTION 4 | | ilding [] Di | mensions | ft x _ | ft | | |
| SECTION 4 - COS 4.1 ESTIMATED (| | 4.0 ==== === | | | | | |
| ITEM | EST. COST | | SIGNS, FENCES & | - 1 | | | |
| 11FAM | EST. COST | DESCRIPTION | FEE EACH ITEM | # of ITEMS | FEE SUB-TOTAL | | |
| 1.Fence or Tent | | a. Fence b. Tent | $25.00 1^{ST}$ item + each additional i | | | | |
| 2. Sign(s) | | c. Sign | 25.00 each | х | | | |
| 3. Shed(s) | | d. Shed | (sf-100) x.25 + | \$30.00 \$30.00 min | | | |
| Total Est. 4.1 (1 | L+2+3) | | TOTAL FEE 4.2 (a | a+b+c) | · | | |
| RECEIPT #: | | | CHECK #: | • | | | |

| I am an employer providing the following workers' compensation coverage for remployees WCC SOCO WCC WCC | 2, | | | | | |
|---|------------------|--|--|--|--|--|
| (policy#/insurance company) [] I am not required to have workers' compensation insurance under M.G.L. c. 15: Sec. 25(c)(6). SECTION 5a - PROPERTY OWNERSHIP Owner of Record: Name (Please Print) Current Address (Please Print) Town State Zip Code SECTION 5b - AUTHORIZED AGENT - To be completed when installer is not acting as owner's agent Authorized Agent: | 2, | | | | | |
| Sec. 25(c)(6). SECTION 5a - PROPERTY OWNERSHIP Owner of Record: Name (Please Print) Current Address (Please Print) Town State Zip Code SECTION 5b - AUTHORIZED AGENT - To be completed when installer is not acting as owner's agent Authorized Agent: | • | | | | | |
| Owner of Record: Name (Please Print) Telephone | <u>·</u> | | | | | |
| Name (Please Print) Current Address (Please Print) Town State Zip Code SECTION 5b - AUTHORIZED AGENT - To be completed when installer is not acting as owner's agent Authorized Agent: | • | | | | | |
| Current Address (Please Print) SECTION 5b - AUTHORIZED AGENT - To be completed when installer is not acting as owner's agent Authorized Agent: | | | | | | |
| SECTION 5b - AUTHORIZED AGENT - To be completed when installer is not acting as owner's agent Authorized Agent: | _ , | | | | | |
| acting as owner's agent Authorized Agent: | | | | | | |
| Authorized Agent: | | | | | | |
| | | | | | | |
| Name (Please Print) Signature | | | | | | |
| Title (Please Print) () Telephone | <u></u> | | | | | |
| Current Address (Please Print) Town State Zip Co | de | | | | | |
| SECTION 6 - CONTRACTOR OR INSTALLATION SERVICES | | | | | | |
| 6 CONTRACTOR OR INSTALLER: Not Required [] | Not Required [] | | | | | |
| Northander Rental Company Name (Please Print) License Number | | | | | | |
| Address (Please Print) Address (Please Print) A Dr. Color Date | | | | | | |
| Signature (713) 589-5072 Telephone | | | | | | |
| SECTION 7a - OWNER AUTHORIZATION - To Be Completed When Owners' Agent, Contractor or Installer Applies For Building Permit | | | | | | |
| I,, as Owner of the subject Property hereb | У | | | | | |
| authorize to act on my behalf, in all matters (Please Print Contractor's Name) | | | | | | |
| relative to work authorized by this building permit application. | | | | | | |
| Signature of Owner Date | _ | | | | | |
| SECTION 7b - CONTRACTOR/INSTALLER DECLARATION (owner/agent signs if installer is not specified) | | | | | | |
| I, (Please Print), (Circle One) hereby declare that the statements and information on the forgoing application are true | and | | | | | |
| accurate, to the best of my knowledge and belief. Signed under the paints and penalties of perjury. | anu | | | | | |
| Signatuse of Installer/Owner/Agent March 2003 | | | | | | |

Certificate of Flame Resistance

REGISTERED **FABRIC** NUMBER

F-140,01

ISSUED BY JOHNSON OUTDOORS INC. **BINGHAMTON, NEW YORK 13902** Manufacturers of the Finest Tent Products Described Herein

Date of Manufacture

FEB 2002

| ITY: NORTHAMPTON | | MA | MA | |
|--|---|---|---|--|
| i Code, NFPA-701*, Under cations and meet or exceed | writers Laboratory of C the Military Flame Spec | anada, and have been tested in bifications of MIL-C-43006G. | in compliance with the | |
| | | | ., | |
| | te that: his certificate have been made it code, NFPA-701*, Under cations and meet or exceed that the cations and meet of exceed that it is not considered. | te that: his certificate have been manufactured with an apid Code, NFPA-701*, Underwriters Laboratory of Code and meet or exceed the Military Flame Spectations and meet OZ. Vinyl WHITE | te that: his certificate have been manufactured with an approved flame retardant chemical i Code, NFPA-701°, Underwriters Laboratory of Canada, and have been tested in acations and meet or exceed the Military Flame Specifications of MIL-C-43006G. Hoperical 14 OZ. Vinyl WHITE BLOCKOUT | |

Snyder Manufacturing, Inc.

Manufacturer of Flame Retardant Vinyl Laminates

*Large Scale

PERMITS/INSP PAYMENT RECPT#: 10024385
TOWN OF AMHERST
TOWN HALL
4 BOLTWOOD AVENUE
AMHERST MA 01002

, • •, •

DATE: 09/18/09 TIME: 10:50 CLERK: inspects DEPT:

PAID BY: NORTHAMPTON RENTAL C PAYMENT METH: CHECK 1753

REFERENCE: A3348 LJL

AMT TENDERED: AMT APPLIED: CHANGE: 25.00 25.00 --.00

SITE ADDRESS: 9 CANTERBURY LN

FEES:

INS001 BUILDING PERMIT 25.00

TOTAL PAID: 25.00